State of Wisconsin Department of Natural Resources Box 7921, Madison, WI 53707-7921 dnr.wi.gov

Off-Site Liability Exemption and Liability Clarification Application

Form 4400-201 (R 2/05)

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Notice: Personally identifiable information that is collected will be used to process your application and will also be accessible to others by request under Wisconsin's Open Records law [ss. 19.31 - 19.39, Wis. Stats.]

Definitions:

"Off-Site Exemption" refers to a statutory limit on liability available to a person with respect to the existence of a hazardous substance in the groundwater or soil, including sediments, on Property possessed or controlled by the person, as provided in s. 292.13, Wis. Stats. The off-site exemption is available only to persons who possess or control the affected property, who meet the requirements and criteria in the statutes. DNR provides a written determination regarding liability upon submittal of this application and the required fee.

"General Liability Clarification" refers to a written determination by the Department, as provided in s. 292.55, Wis. Stats., that clarifies the environmental liability of a person, business or another party for a specific situation. General liability clarifications can be provided in situations when the party requesting the clarification does not meet one of the requirements for the off-site exemption at the time of the application submittal, for example, does not yet own the off-site property. This application form should be used to request a written liability clarification for property affected by an off-site discharge.

"Property" refers to the subject property that has been impacted by hazardous substances that migrated there from a different property containing the original contamination source. The subject property is often referred to as an "off-site" or "off-source" property.

"Possession or control" refers to holding title to the property or exercising possession or control over the property by some other means, such as a lease.

[NOTE: a person with an easement doesn't have possession or control over the property; the property owner just allows the person to use part of the property for a limited purpose].

Instructions:

- Use this application to request a written determination from the Department for the off-site liability exemption or for the liability clarification regarding **property affected by an off-site discharge**. See DNR's Fact Sheet 10 Off-Site Contamination: How Does It Affect My Property? (PUB-RR-589 April 2004) for general information on eligibility requirements, liability clarification letters related to the off-site liability exemption, and property owner responsibilities. Information and these publications are available by contacting a DNR office or on the Internet at: http://dnr.wi.gov/org/aw/rr/.
- Complete the application and include the information that adequately shows that the required criteria are met. See Section 7 on page 4.
- Include a \$500 fee payment with this application, in accordance with ch. NR 749, Wis. Adm. Code.
- Send the completed application, fee, and supporting materials to the DNR regional office where the Property is located, as listed on page 6. Contact the person listed with any questions.
- The Department will not consider your application complete unless you provide the information requested and the fee. Review of the application does not begin until the application is complete.
- Department staff will make every attempt to provide timely written determinations. However, the time required for the determination varies depending on the complexity of the site, and the clarity and completeness of the application and supporting documentation.

Do not use this application form to request liability clarifications for properties without off-site contamination. Contact one of the DNR regional offices or see the DNR website on the Internet for more information.

1. Applicant information for	or person requesting the o	determination.				
Applicant Last Name			First			MI
Address		City	-	State	ZIP Code	
Telephone Number	Fax Number	E-Ma	ail Address	l .		
Contact for questions (if differen	nt than applicant) Last Name		First			MI
Address		City		State	ZIP Code	
Telephone Number	Fax Number	<u> </u> E-Ma	ail Address	 		

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2. Applicant eligibility for off-site exemption or off-site liability clarification.					
Request one determination based on whethe appropriate certification.	r the requirements for the	off-site exe	mption are currently met. S	See page 5 and sign the	,
Off-Site Discharge Exemption – I "poss request an off-site exemption letter.	sess or control" the Prop	perty and I b	pelieve I meet the criteria	for an off-site exempt	ion. I
I have completed Section 8a on page	je 5.				
As the applicant, I am:					
Current owner					
Other* Explain your relationship to the	e Property or the nature o	f your posse	ssion or control of the Prop	erty:	
*Additional documentation may be request requests a determination, DNR would nee					ssee
Off-site Liability Clarification – I lack or liability clarification letter that explains					
I have completed Section 8b on page	je 5.				
Requirements for the off-site exemption the	nat are missing:				
1. Currently I do not possess or contr	ol the Property and				
I plan to buy the Property on _	(Da	te) or			
I plan to lease the Property on	(D	ate).			
2. Currently no contamination has be onto the Property.	en detected on the Prope	rty but there	is credible evidence that c	ontamination has migra	ted
3. Multiple contiguous properties are	believed to be affected by	/ contaminat	ion from a known source.		
4. Other: Explain the circumstances h	nere or in an attachment.				
outon Explain the encounterances i	ioro or in an adaominoni.				
3. Information on additional parties.					
Check the appropriate box to have a copy of	the determination letter se	ent to one or	more of these parties:		
Environmental Consultant			First	N	MI
Address		City		State ZIP Code	
Telephone Number	Fax Number	<u> </u>	E-Mail Address		
Attorney / Other Last Name			First		MI
Address		City		State ZIP Code	
Telephone Number	Fax Number		E-Mail Address		

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Public Land Survey Coordinates Latitude	
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Public Land Survey Coordinates W W Section Range E / W Township Datum (check only one): Method NAD27 NAD83 1990 Adjustment NAD27 NAD83 1990 Adjustment NAD27 NAD83 1990 Adjustment NAD27 NAD28 1990 Adjustment NAD27 NAD28 1990 Adjustment NAD27 NAD28 1990 Adjustment NAD27 NAD28 1990 Adjustment NAD28 NAD28 NAD28 NAD29 NAD28 NAD29 NAD28 NAD29 NAD28 NAD29 NAD28 NAD29 NA	IP Code
Public Land Survey Coordinates W W Section Range E / W Township Datum (check only one): Method NAD27 NAD83 1990 Adjustment NAD27 NAD83 1990 Adjustment NAD27 NAD83 1990 Adjustment NAD27 NAD83 1990 Adjustment NAD27 NAD28 NAD27 NAD28 NAD2	
N	
I request that DNR provide a copy of the Liability Clarification Letter to the current owner. Interest Owner (if different than applicant) Last Name First	Accuracy
Address City State Telephone Number Fax Number E-Mail Address Information about contamination on the impacted Property. Have hazardous substances been detected on the Property or Properties? No. If not, explain why contamination is suspected on the Property or Properties in an attachment or here: Yes. Check all that apply: Groundwater Soil Sediment Other, describe:	
Address City State Telephone Number Fax Number E-Mail Address Information about contamination on the impacted Property. Have hazardous substances been detected on the Property or Properties? No. If not, explain why contamination is suspected on the Property or Properties in an attachment or here:	
Telephone Number	MI
Information about contamination on the impacted Property. Have hazardous substances been detected on the Property or Properties? No. If not, explain why contamination is suspected on the Property or Properties in an attachment or here: Yes. Check all that apply: Groundwater Soil Sediment Other, describe:	ZIP Code
Have hazardous substances been detected on the Property or Properties? No. If not, explain why contamination is suspected on the Property or Properties in an attachment or here: Yes. Check all that apply: Groundwater Soil Sediment Other, describe:	
Have hazardous substances been detected on the Property or Properties? No. If not, explain why contamination is suspected on the Property or Properties in an attachment or here: Yes. Check all that apply: Groundwater Soil Sediment Other, describe:	
No. If not, explain why contamination is suspected on the Property or Properties in an attachment or here: □ Yes. Check all that apply: □ Groundwater □ Soil □ Sediment □ Other, describe: □	
Has the presence of contamination been reported to any State or local governmental agency? No.	
If yes, check all that apply: DNR Division of Emergency Government Commerce Department of Agriculture, Trade and Consumer Protection (DATCP) Other, describe:	
Is the source of the contamination known? Check only one. No. Yes. If yes, what is the source of the contamination? Provide the name and address of the owner of the contamination source or source property, if known.	
Owner Name	
Address City State ZII	IP Code
Suspected. If suspected to be migrating from a nearby source, what is the source and its address?	
Provide the name of the owner of the suspected contamination source or source property, if known. Owner Name	
Owner realite	
Address City State ZII	

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6. Specific liability clarification questions relating to off-site contamination.
I have no additional liability clarification questions.
I request a DNR response to the questions provided to clarify my liability for the cleanup of off-site contamination to be included in the written determination (questions should be provided here or in an attachment):

Property information needed for the determination of off-site exemption or off-site liability clarification.

DNR requires adequate information in order to make the determination requested in this application. Incomplete or inadequate information will delay the completion of the determination. DNR has the authority to request additional information, if needed. Include the following information with the application, if appropriate:

- 1. Map(s) showing Property location(s) and any suspected or known off-site contaminant source properties.
- 2. For any environmental data submitted, include:
 - a) Property map(s) showing sampling locations for all data submitted:
 - b) Interpretation of data signed by a qualified environmental professional, including data tables and figures that include data;
 - c) Soil boring logs;
 - d) Groundwater monitoring well construction, development and sampling logs;
 - e) Laboratory-provided data reports;
 - f) Survey information for groundwater elevations;
 - g) Chain of custody forms for all samples; and
 - h) Description of sample collection methods.

The submitted materials should document that the statutory criteria are satisfied regarding the contamination and its source as listed in A through C below.

- A. Document that there is hazardous substance contamination present in soil, groundwater and/or sediment on the Property or Properties. Examples of information include: Analytical results and interpretations for samples collected from soil, groundwater, and/or sediment on the Property, or at or near the Property line, that conclusively document the presence of a hazardous substance in one or more of these media on the Property. This information could be documented in a Phase II Environmental Assessment report, or could refer to existing reports in DNR files related to the source property.
- B. Document that the hazardous substance contamination, which is present in soil, groundwater, and/or sediment on the Property or Properties, is migrating onto the Property or Properties from an off-site source.

Examples of information include:

- 1. Information identifying known or suspected discharges of the hazardous substance on neighboring property(ies), e.g., a Phase I Environmental Assessment report, information in existing reports in DNR files related to the source property.
- 2. Soil, groundwater and/or sediment sample data and interpretations adequate to conclude that the hazardous substance is migrating onto the Property or Properties, such as:
 - Samples from monitoring wells located on the upgradient side of the Property or Properties (include information to establish upgradient direction), which show increasing contaminant concentrations toward the upgradient Property or Properties;
 - Off-site investigation results that provide information about groundwater flow direction and contaminant movement that convincingly document hazardous substances from a known or suspected off-site source have impacted the Property or Properties; or
 - A description of the event(s) that caused the deposit or accumulation of contaminated sediment on the affected Property or Properties and a map showing the location of the water body and elevations of the affected Property or Properties and water surface at normal flow and flood stage conditions.
- C. Document that the discharge of a hazardous substance is not from a source on the Property or Properties.

Examples of information include:

- 1. Information related to historical activities, such as descriptions of chemicals used and handled, areas where chemicals were used and handled, and areas of potential discharges on the Property or Properties, e.g., a Phase I Environmental Assessment report.
- 2. Where the types of hazardous substances used, handled, or discharged on the Property or Properties are the same as the hazardous substances migrating onto the Property or Properties, provide environmental information, e.g., expanded Phase II environmental assessment data, including type and volume of hazardous substances handled, generated or stored on the applicant's Property during the period of ownership and/or length of lease, and analytical results and interpretation for soil and groundwater samples collected from potential discharge areas to demonstrate that the contamination migrating onto the Property is separate and distinct from the contamination that may be on the Property.

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8. Sign one of the certifications below based on whether the requirements of the off-site exemption are currently met.

8a. Certification if the applicant currently meets all the requirements for the off-site liability exemption.

Applicant Certification for a Determination for the Off-Site Discharge Exemption, as provided in s. 292.13, Wis. Stats.

I certify that I possess or control the Property and have read and am familiar with the information on this application. The information on and included with this application is true, accurate and complete to the best of my knowledge.

I understand that I retain the responsibility for any hazardous substance discharges that I caused or cause, and for any discharges whose source I possess or control on the Property or on other properties.

I believe that I meet the criteria in s. 292.13, Wis. Stats., with respect to the fact that I never controlled or possessed either the source property itself, or the hazardous substances that have migrated onto the Property from the source property, nor did I cause the hazardous substance discharge for which I am seeking this written exemption.

I understand that if I fail to satisfy the statutory requirements in s. 292.13, Wis. Stats., such as failing to provide access to the Property, the DNR has the authority to revoke the off-site exemption for the Property.

Applicant Last Name	First		MI
Signature		Date Signed	

8b. Certification if applicant has not currently met all the conditions for the off-site exemption.

Applicant Certification for a Determination for Liability Clarification, as provided in s. 292.55, Wis. Stats.

I certify that I have read and am familiar with the information on this application and that the information on and included with this application is true, accurate and complete to the best of my knowledge.

I understand that I retain the responsibility for any hazardous substance discharges that I caused or cause, and for any discharges whose source I possess or control on the Property or Properties or on other properties.

It is my understanding that I have not met all the conditions for the off-site exemption at the time of this application, but I request a liability clarification determination that includes the conditions under which I or others would become eligible for the off-site discharge exemption for the Property or Properties, if I were to meet all the criteria under s. 292.13, Wis. Stats. I believe that I meet the criteria regarding the source of the contamination and the source property in s. 292.13, Wis. Stats., with respect to the fact that I never controlled or possessed either the source property itself, or the hazardous substances that have migrated onto the Property or Properties from the source property, nor did I cause the hazardous substance discharge for which I am seeking this written exemption.

I understand that if I meet the criteria in s. 292.13, Wis. Stats., and obtain the off-site liability exemption, but subsequently fail to satisfy the statutory requirements in s. 292.13, Wis. Stats., such as failing to provide access to the Property, the DNR has the authority to revoke the off-site exemption for the Property.

Applicant Last Name	First		MI
Signature		Date Signed	

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9. DNR contacts and addresses for application submittals.

Send or deliver the completed application, additional materials, and the fee to the address in the region where the Property is located.

DNR NORTHERN REGION

John Sager (715) 623-4190, Ext. 3125 Department of Natural Resources 223 East Steinfest Road Antigo WI 54409

DNR NORTHEAST REGION

Annette Weissbach (920) 662-5165 Department of Natural Resources PO Box 10448 Green Bay WI 54307-0448

DNR SOUTH CENTRAL REGION

Mike Schmoller (608) 275-3303 Department of Natural Resources 3911 Fish Hatchery Road Fitchburg WI 53711

DNR SOUTHERN REGION

Margaret Brunette (414) 263-8557 Department of Natural Resources 2300 North Martin Luther King Dr. Milwaukee WI 53212

DNR WEST CENTRAL REGION

Loren Brumberg (715) 839-3770 Department of Natural Resources 1300 Clairemont Ave. Eau Claire WI 54702



	For DNR Office	Use Only	
Date Received	BRRTS Activity Name	BRRTS Activity Name	
Date Assigned	DNR Reviewer		BRRTS FID No. (if used)
Comments			Fee Enclosed Yes No
Date Approved	Date Additional Information Requested	Date Withdrawn	Date Denied